

ALASKA EMS SYMPOSIUM 2006

Early Registration Ends October 9, 2006. Mail or Fax this form with payment or purchase order to:
Southern Region EMS Council, Inc.
6130 Tuttle Place Anchorage, AK 99507-2041 (907) 562-6449 (phone) (907) 562-9893 (fax)

PURCHASE ORDERS WILL NOT BE ACCEPTED AT THE DOOR

PLEASE PRINT CLEARLY: Use separate form for each individual registering

Name:	Level of Training:		
Company/Organization:	E-Mail Address:		
Address:	Phone:		
City:	State:	Zip:	

(1) PRE-SYMPOSIUM EVENTS – WEDNESDAY AND THURSDAY, NOVEMBER 8 & 9, 2006

Wednesday, November 8 8 a.m. to 5 p.m.	Thursday, November 9 8 a.m. to 12 p.m.	1:30 to 5 p.m.	FEES (Please circle your choices below)
<input type="checkbox"/> Rescue Captain's Forum	(Wednesday Only)		\$110
<input type="checkbox"/> Advanced Pediatric Life Support – Course	(Wednesday and Thursday)		\$210
<input type="checkbox"/> Applied Suicide Interventions Skills Training	(Wednesday and Thursday)		\$210
	Thursday A.M. Half Day Sessions: <input type="checkbox"/> Advanced Airway Lab <input type="checkbox"/> Point of Intervention <input type="checkbox"/> Being an Effective Teacher <input type="checkbox"/> Parasitology 101 for EMTs*	Thursday P.M. Half Day Sessions: <input type="checkbox"/> Advanced Airway Lab <input type="checkbox"/> Integration of Capnography <input type="checkbox"/> Bioterrorism Curriculum <input type="checkbox"/> Parasitology 101 for EMTs*	Half Day Session Costs: One AM OR one PM \$70 One AM AND one PM \$110
<small>*Parasitology 101 for EMTs will be held at the Alaska Public Health Lab, 4500 Boniface Pkwy, (Tudor & Boniface). Registration deadline is Oct. 10. Transportation is participant's responsibility.</small>			
			Presymposium Total \$ _____

(2) CLINICAL TRACK 2006 Fees – THURSDAY, FRIDAY AND SATURDAY, NOVEMBER 9, 10, & 11, 2006

<input type="checkbox"/> Physicians	\$260
<input type="checkbox"/> Nurses, PAs, Paramedics	\$210

(3) SYMPOSIUM 2006 Fees – FRIDAY AND SATURDAY, NOVEMBER 10 & 11, 2006

<input type="checkbox"/> Physician	\$150
<input type="checkbox"/> Career Health Care Provider/Administrator/Injury Prevention Specialist (RN, PA, Paramedic, EMT, etc.)	\$90
<input type="checkbox"/> Volunteer EMS Provider	\$60

(4) EMS AWARDS BANQUET – SATURDAY, NOVEMBER 11, 2006

Please reserve _____ ticket(s) for the EMS Awards Banquet at \$35 each. _____ x \$35 = Total: \$ _____		
<input type="checkbox"/> Grilled Alaskan Salmon <small>Boneless fillet of Alaskan salmon grilled with cracked green and pink peppercorns, rice and fresh vegetables, dinner rolls and Peach Melba or chocolate walnut cake</small>	<input type="checkbox"/> Grilled Chicken with Tortellini <small>Grilled julienne breast of chicken with fresh basil and roasted garlic sauce on ricotta cheese stuffed tri-color tortellini, Peach Melba or chocolate walnut cake</small>	
I require a special meal due to dietary restrictions. <i>Specifications are</i> _____		

NO COST FOR THE FOLLOWING, BUT SEATING IS LIMITED:

<input type="checkbox"/> November 10 at 12:15 p.m.— Safe Kids Luncheon (sponsored by Providence Alaska Medical Center)	Yes	No
<input type="checkbox"/> November 10 at 12:15 p.m.— EMT Instructors Luncheon (sponsored by Alaska Regional Hospital)	Yes	No

Add \$20 late fee if registering or postmarked after October 9, 2006

(1) PRE-SYMPOSIUM EVENTS fee + _____

(2 OR 3) SYMPOSIUM 2006 fee + _____

No refund or re-sale of banquet tickets (4) EMS AWARDS BANQUET fee + _____

TOTAL FEES = _____

Please make checks payable to "Southern Region EMS Council". We also accept VISA or MasterCard – Enter information below

Name on Credit Card (if different than above)		Credit Card Billing Address including Zip Code (if different than above)	
16 digit credit card number	Last 3-digit code on the back	Exp. Date	Signature

REFUNDS for those who cannot attend Symposium 2006 must be requested in writing postmarked no later than December 10, 2006 to the registration address above. No refunds will be given for banquet tickets.